

Division of Licensing and Protection

HC 2 South, 280 State Drive

Waterbury, VT 05671-2060

<http://www.dail.vermont.gov>

Survey and Certification Voice/TTY (802) 241-0480

Survey and Certification Fax (802) 241-0343

Survey and Certification Reporting Line: (888) 700-5330

To Report Adult Abuse: (800) 564-1612

November 1, 2018

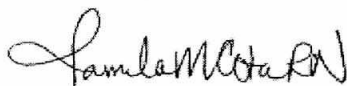
Ms. Sue Cutting, Manager
Ave Maria Community Care Home
19 School Street
Richford, VT 05476-1130

Dear Ms. Cutting:

Enclosed is a copy of your acceptable plans of correction for the survey conducted on **October 2, 2018**. Please post this document in a prominent place in your facility.

We may follow-up to verify that substantial compliance has been achieved and maintained. If we find that your facility has failed to achieve or maintain substantial compliance, remedies may be imposed.

Sincerely,



Pamela M. Cota, RN
Licensing Chief



OCT 26 2018

PRINTED: 10/12/2018
FORM APPROVED

Division of Licensing and Protection

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 0005	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING: _____	(X3) DATE SURVEY COMPLETED 10/02/2018
NAME OF PROVIDER OR SUPPLIER AVE MARIA COMMUNITY CARE HOME		STREET ADDRESS, CITY, STATE, ZIP CODE 19 SCHOOL STREET RICHFORD, VT 05476	
(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)
R100	Initial Comments: An unannounced onsite relicensing survey was conducted by the Division of Licensing and Protection on 10/2/18. The following regulatory deficiencies were identified.	R100	
R136 SS=D	V. RESIDENT CARE AND HOME SERVICES 5.7. Assessment 5.7.c Each resident shall also be reassessed annually and at any point in which there is a change in the resident's physical or mental condition. This REQUIREMENT is not met as evidenced by: Based on record review and staff interview, the home failed to ensure that an annual assessment was completed for 1 of 3 residents sampled (Resident#1). Findings include: Per record review, Resident #1 last annual reassessment was completed on 3/17/17. Per interview on 10/2/18 at 3:15 PM, the RN confirmed that the assessment due in March 2018 had not been completed for Resident #1.	R136	(PLEASE SEE ATTACHED)
R172 SS=D	V. RESIDENT CARE AND HOME SERVICES 5.10 Medication Management 5.10.h All medicines and chemicals used in the home must be labeled in accordance with	R172	(PLEASE SEE ATTACHED)

Division of Licensing and Protection
LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

TITLE

(X6) DATE

STATE FORM

6899

IL7X11

If continuation sheet 1 of 4

R136 - R266 POCs accepted K Campos RN/PMC 10/31/18

Division of Licensing and Protection

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R172	Continued From page 1 currently accepted professional standards of practice. Medication shall be used only for the resident identified on the pharmacy label. This REQUIREMENT is not met as evidenced by: Based on observation and staff interview, the home failed to ensure that all medications were labeled in accordance with professional standards of practice for 1 resident sampled (Resident #2). Findings include: Per observation of the medication cart, there was an Insulin pen opened and in use that was not labeled with the resident's name nor the date that it was first opened or a discard date. Per interview on 10/2/18 at 12:15 PM, the medication delegated staff person confirmed that this was the Insulin pen in use for Resident #2, and that it was not labeled with the name of the resident or the date it was opened.	R172			
R179 SS=D	V. RESIDENT CARE AND HOME SERVICES 5.11 Staff Services 5.11.b The home must ensure that staff demonstrate competency in the skills and techniques they are expected to perform before providing any direct care to residents. There shall be at least twelve (12) hours of training each year for each staff person providing direct care to residents. The training must include, but is not limited to, the following: (1) Resident rights; (2) Fire safety and emergency evacuation; (3) Resident emergency response procedures,	R179	PLEASE SEE ATTACHED		

SAD

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R179	Continued From page 2 such as the Heimlich maneuver, accidents, police or ambulance contact and first aid; (4) Policies and procedures regarding mandatory reports of abuse, neglect and exploitation; (5) Respectful and effective interaction with residents; (6) Infection control measures, including but not limited to, handwashing, handling of linens, maintaining clean environments, blood borne pathogens and universal precautions; and (7) General supervision and care of residents. This REQUIREMENT is not met as evidenced by: Based on employee record review and staff interview, the home failed to ensure that there were 12 hours of inservice training with required topics for 1 of 5 employees reviewed. Findings include: Per review of the training records of five randomly selected employees, 1 of 5 did not have the required hours of inservicing on record. For the years 2017 and 2018, this employee only had 2 hours of training documented, and did not meet the requirement of the mandatory topics. Per interview on 10/2/18 at 3:20 PM, this employee and the RN confirmed that these were the only inservices completed in the time frame reviewed.	R179		
R266 SS=E	IX. PHYSICAL PLANT 9.1 Environment 9.1.a The home must provide and maintain a safe, functional, sanitary, homelike and	R266	(PLEASE SEE ATTACHED)	

SAD

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R266	Continued From page 3 comfortable environment. This REQUIREMENT is not met as evidenced by: Based on observation and staff interview, the home failed to ensure a safe environment regarding cleaning products. Findings include: Per observation on the initial tour of the home at 9:15 AM, the shared resident bathroom on the first floor had a shelf above the toilet that had cleaning products within reach of residents. There was a bottle of Urine odor remover/cleaner, Comet powdered cleanser, and Lysol spray disinfectant on the shelf. In the upstairs shared resident bathroom there was also a bottle of Urine Odor remover/cleaner, Comet powdered cleanser, and Lysol disinfectant spray sitting on an open shelf in the bathroom. Per interview on 10/2/18 at 9:30 AM, the Manager of the home confirmed that these cleaning products were left in reach of residents in the bathrooms.	R266			

340

Ave Maria Home
Plan of Correction
Residential Care Home State Survey
October 2, 2018

R136

5.7.c

Action:

The Nurse Manager has completed the annual reassessment for Resident #1 as of 10/5/2018.

Measures:

The Nurse Manager met with the nursing team to review the requirement that each resident shall be reassessed annually and at any point in which there is a change in the resident's physical or mental condition.

Monitors:

The Nurse Manager and entire Nursing Staff will monitor this practice to ensure that this deficiency does not reoccur.

Date Completed:

10/5/2108

R172

5.10.h

Actions:

On October 2, 2018, the insulin pen for Resident #2 was labeled with the resident's name and dated with the date that it was opened.

Measures:

The Nurse Manager and entire nursing team will ensure that all medications and chemicals used in the home will be labeled in accordance with currently accepted

professional standards of practice and that medication shall be used only for the resident identified on the pharmacy label.

Monitors:

The Nurse Manager and entire nursing team will monitor this practice to ensure that this deficiency will not reoccur.

Date Completed:

10/2/2018

R179

5.11.b

Action:

As of 10/16/18, the cited employee has 12 hours of training documented and meets the requirement of mandatory topics (Please see Attachment A).

Measures:

The Manager will review the training progress of each staff member at Ave Maria Home on no less than a quarterly basis to ensure that each staff person providing direct care to residents will receive at least twelve (12) hours of training each year as identified in Regulation 5.11.b in the Vermont Residential Care Home Regulations.

Monitors:

The Manager and Administrator will monitor this practice to ensure that this deficiency will not reoccur.

Date Completed:

Oct 16, 2018

R266

9.1.a

Action:

On October 2, 2018, the bottle of Urine odor remover/cleaner, Comet powdered cleanser and Lysol spray disinfectant was removed from the bathrooms on the first and second floor.

Measures:

The Manager has reminded all staff that Ave Maria Home must provide and maintain a safe, functional, sanitary, homelike and comfortable environment. To that end, all harmful cleaning products must be stored in a locked area when not in use.

Monitors:

The Manager and Administrator will monitor this practice to ensure that this deficiency will not reoccur.

Date Completed:

October 2, 2018

ATTACHMENT A

RELIAS

Transcript For [REDACTED]

Course Name	Completed	Hours	Final Exam Score	Instructor Name	Organization
A Day in the Life of Henry: A Dementia Experience	10/13/2018	0.25	100	Relias Learning	Ave Maria Community Care Homes Inc
About End of Life: Communication	10/16/2018	1.25	91	Relias Learning	Ave Maria Community Care Homes Inc
Back Injury Prevention	7/15/2018	0.50	100	Relias Learning	Ave Maria Community Care Homes Inc
Bloodborne Pathogens Self-Paced	10/13/2018	0.50	80	Relias Learning	Ave Maria Community Care Homes Inc
Caring for Non-Communicative Patients	10/13/2018	1.25	90	Relias Learning	Ave Maria Community Care Homes Inc
Caring for Older Adults: The Aging Process	10/16/2018	1.00	80	Relias Learning	Ave Maria Community Care Homes Inc
Communicating with the Hearing Impaired	10/8/2018	1.00	88	Relias Learning	Ave Maria Community Care Homes Inc
Diets: Not Just for Weight Loss	10/13/2018	1.00	80	Relias Learning	Ave Maria Community Care Homes Inc
Effective Communication	10/13/2018	0.25	100	Relias Learning	Ave Maria Community Care Homes Inc
End of Life Care: Examining our Attitudes about Death	10/16/2018	1.00	80	Relias Learning	Ave Maria Community Care Homes Inc
End of Life: Grief, Loss, Death, and Dying	8/7/2018	1.00	80	Relias Learning	Ave Maria Community Care Homes Inc
Preventing Slips, Trips and Falls	10/13/2018	0.25	100	Relias Learning	Ave Maria Community Care Homes Inc
Preventing, Recognizing, and Reporting Abuse	10/2/2018	0.75	100	Relias Learning	Ave Maria Community Care Homes Inc
Resident Rights Essentials	10/13/2018	0.50	80	Relias Learning	Ave Maria Community Care Homes Inc
Understanding the Meaning Behind Behaviors	10/13/2018	0.50	80	Relias Learning	Ave Maria Community Care Homes Inc
Workplace Emergencies and Natural Disasters: An Overview	10/8/2018	1.00	80	Relias Learning	Ave Maria Community Care Homes Inc

Total Hours: 12.00

I certify that the trainings listed above were completed by me.

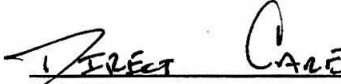
X [Signature]
Staff Name

If you require assistance that is related to

RELIAS

Transcript For ~~XXXXXXXXXX~~

X 
Staff Signature


Job Title

this transcript, please contact Relias
Support by calling 1-800-381-2321 or
emailing support@reliaslearning.com.